## UNITED STATES DISTRICT COURT

for the

## Western District of Oklahoma

DEANDRE BROWN,	)	
Plaintiff(s),	) )	
HEALTHCARE REVENUE RECOVERY GROUP, L.L.C., d/b/a ARS ACCOUNT RESOLUTION SERVICES	) ) ) )	Case No. CIV-21-855-F
Defendant(s)	)	

## SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)
HEALTHCARE REVENUE RECOVERY GROUP
d/b/a ARS Account Resolution Services
1643 Harrison Pkwy, Ste 100, Building H
Sunrise, FL 33323

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) - or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12(a)(2) or (3) - you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Nkem A. House

House Law Group 425 W. Wilshire Blvd., Ste. E OKC, OK 73116

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.



SUMMONS ISSUED: 5:54 pm, Aug 27, 2021 CARMELITA REEDER SHINN, Clerk AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No.

## PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))

	This summons for (nar	me of individual and title, if a	any)				
was re	ceived by me on (date)						
	☐ I personally served	I the summons on the in	ndividual at (place)				
			on (date)	; or			
	☐ I left the summons at the individual's residence or usual place of abode with (name)						
	, a person of suitable age and discretion who resides there,						
	on (date), and mailed a copy to the individual's last known address; or						
	☐ I served the summe	ons on (name of individual)			, who is		
	designated by law to accept service of process on behalf of (name of organization)						
			on (date)	; or			
	☐ I returned the sum		; or				
	☐ Other (specify):						
	My fees are \$	for travel and	for services, for a total of \$	0.00			
	I declare under penalty of perjury that this information is true.						
Date:		_					
			Server's signature				
		_	Printed name and title				
		_	Server's address				

Additional information regarding attempted service, etc: